317.327-4815



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4) Summary Sheet

— Quiminal y Onios	
FILE NUMBER	
TOTAL PAGES IN ENTIRE CFA-	4 REPÖRT
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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

	ICTAL	AGES IIA EIA	TIRE CHA-4 KEPOKI
IS THIS AN AMENDMENT? Yes No	a		
COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)	nsma .		·
Sturgill for Judge			
2. Acronym or Abbreviated Name (If any)	3. Committee Tei		
	(317)7	<u>22.010</u>	54
	heck if this is a new	address	
5. City, State, ZIP Code		1 to 12 - 1 to 1	
Indole IN 46220	6. Party Affiliation (if applicable)		
CANDIDATE INFORMATION (For Candidate's C	Committees Only,)	•
7. Full Name of Candidate (Include any nickname)	8. Party Affiliation	or if independe	ant Cendidate
Jonathan Patrick Sturgill	Republican		
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence		
	Marion		
TYPE OF REPORT		CONVENTE	ON CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primery Pre-Election Annual Nomination Other	☐ Pre-Cor	ivention	
Final/Disbends Committee (lines 18, 19, and 20 must be 10) Outgoing Treasurer (within 10 days amend Statement of	of Organization)	Post-Co	nvention
12. Reporting Period;	CC	LUMN A	COLUMN B
From: Jan 12013 Through: Dec 312013	Th	is Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	313	6.14	
14. Cash on hand and investments January 1, current year.			•
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Hemized (use Schedule A)	Ø	, 	
15b. Uniternized	Ø		
	TOTAL Q		
	TOTAL Ø		
EXPENDITURES			
(Note: These amounts Include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	(100	0.00	
17b. Uniternized Service Cha	rae la	1.00)	
17c. Add lines 17a and 17b in both columns SUB	TOTAL (() (TO	<u>(A</u> (O))	
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL 0.10	9.14	
19. Debts OWED BY the committee (use Schedule D)		0	
20. Debts OWED TO the committee (use Schedule E)		<u>Ø</u>	
CERTIFICATION			FOR OFFICE USE ONLY
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	TRUE, CORRECT AND (
Signature of Treasurer Title	Date		-Myla a. Elder

want Jell I reasurer

WARNING: Any information contained in this report from not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a frequency commits a Class D folony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

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(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE	NUME	ER
Page _	1	_ of _	

				<u> </u>	
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	I COLUMN B CUMULATIVE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PER OD	YEAR-TO-DATE	LEARENUITURE
Code UNI WATER	7 .	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		· ·	4.5.
Friends of Mike McQuiller Indpls. IN	nla nla	Direct in-Kind Payment of Debt Returned Contribution Other Purpose:	580 ,00	500 00	6.9.15
Washington Two PFAC	nia	Direct In-Kind Payment of Debt Returned Contribution Other	500.00	OD 002	2,1415
Indols IN	na	Purpose: MInDay	Scanser		
Code		Direct In-Kind Peyment of Debt Returned Contribution Other Purpose:	150.75		7.7
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	-		,
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Psyment of Deot Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAGE	GE OF SCHEDULE B	\$ 1000.00		
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH	E LAST PAGE ONLY	5) 000,00		
(Enter total on ITEM 17a of the Summary Sheet)					